

December 23, 1984

Ross Baldessarini, M.D.
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115 Mill Street
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Dear Ross,

Thank you very much for your prompt reply to my request for more information about your DST reviews. The reports are very useful, and I will send you a copy of my review for Peter Loosen when it is done in January.

When Yannis Papakostas worked at Stony Brook and reported that failure of the DST to normalize was associated with a poor clinical outcome, I was diffident, but encouraged him to publish his finding. Since then, the number of reports has increased, and while the diagnostic usefulness of the DST remains in question, I am more than ever impressed that the continued presence of abnormal cortisol measures is a poor prognostic sign -- one that we ignore rarely, often increasing our treatment, or at the least, increasing our vigilance of the patient's course. Your reports support this impression.

Your summaries combine the data for antidepressant drugs and ECT. The efficacy of ECT and drug therapies differ, often markedly, with ECT usually superior to that of drug therapies. It may be a fruitful exercise to extract the ECT data from the other antidepressant therapies, to assess the relationships between DST findings and the ECT process.

As you may know, I have accepted the responsibility to edit a new journal, CONVULSIVE THERAPY, to be published by Raven Press, with the first issue to appear in March. Should you undertake such a study, I would be pleased to have an opportunity to consider it for this new journal.

My best wishes for a happy and productive 1985.

Sincerely yours,

Max Fink, M.D.
Professor of Psychiatry